

CONNECTICUT CHAPTER OF THE AMERICAN
ACADEMY OF PEDIATRICS
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HB 6403- AN ACT CONCERNING UTILITY TERMINATION FOR
HOUSEHOLDS WITH A MEMBER LESS THAN TWENTY-FOUR
MONTHS OLD.

**The CT Chapter of the American Academy of Pediatrics supports
this bill and we are very pleased that the Energy and Technology
Committee has seen fit to raise this as a priority issue.**

As you know, present law prohibits the termination of gas and electric service during the winter moratorium, November 1 to May 1 in customers with hardship and customers with life threatening conditions are protected year round. This new bill would add infants and toddlers as a category for protection against utility termination, and extend the dates for several additional weeks.

We believe it would make it a much stronger and more meaningful bill if the utility companies were unable to terminate the service year-round.

The reason it is so important that this bill be extended to customers with children under the age of 2 is that as many people have come to realize what pediatricians have always known—that children are not just little adults. The immature ability of infants and toddlers to regulate their body temperatures makes them more vulnerable than healthy adults to extreme variations in temperature in the summer heat and in the winter cold.ⁱ Given the high cost of heating and cooling, families have been forced to choose between paying for food and gas/electricity.

Research conducted by the Children's HealthWatch and Boston Medical Center found that children in households with a utility shut-off or who have been refused delivery of heating fuel, or perhaps even use their cooking stove as a source of heat wereⁱⁱ:

- 22% more likely to have been hospitalized since birth
- 36% more likely to be reported in fair or poor health
- 82% more likely to be at risk for developmental delays

Many families that are unable to pay their gas, electric, or heating-fuel bills often rely on unsafe and improvised energy sources such as gas-stoves and candle-firesⁱⁱⁱ. Alternative heating sources can result in severe, negative health consequences for children including:

- Increased incidence of burns^{iv}
- Elevated carbon monoxide exposure^v
- Higher rates of respiratory illness^{vi}
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In 2002, 24% of all fatal home candle fires happened in households in which power had been terminated. Children aged less than 5 years had a 2.5-fold relative risk for death, the highest of all age groups.^{vii}

Currently, four other states have passed legislation prohibiting utility termination in households with young children including Massachusetts, Idaho, Minnesota and Wisconsin^{viii}.

There is no cost to the state. Yes, utility bills will continue to accrue and households are still responsible for the cost.

Please support changing raised H.B. 6403 to help protect the health of Connecticut's children year-round.

ⁱFalk B. Effects of thermal stress during rest and exercise in the paediatric population. Sports Med. 1998;25(4):221–240

ⁱⁱ Children's HealthWatch. Energy Insecurity. <http://www.childrenshealthwatch.org/page.php?id=167>

ⁱⁱⁱ APPRISE. 2005 National Energy Assistance Survey, Final Report. Washington, DC: National Energy Assistance Directors Association; 2005. 90XP0040

^{iv} Palmieri TL, Greenhalgh DG. Increased incidence of heater-related burn injury during a power crisis. Arch Surg. 2002; 137(10):1106–1108

^v Triche EW, Belanger K, Beckett W, et al. Infant respiratory symptoms associated with indoor heating sources. Am J Respir Crit Care Med. 2002;166(8):1105–1111

^{vi} Wong TW, Yu TS, Liu HJ, Wong AH. Household gas cooking: a risk factor for respiratory illnesses in preschool children. Arch Dis Child. 2004;89(7):631–636

^{vii} Ahrens M; National Fire Protection Association, Fire Analysis and Research Division. Home Candle Fires. Quincy, MA: National Fire Protection Association; 2005